



Patent
Attorney's Docket No. 002010-742

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Mary M. BENDIG et al.

Application No.: 09/155,739

Filed: September 11, 1998

For: THERAPEUTIC USES OF
HUMANIZED ANTIBODIES AGAINST
ALPHA-4-INTEGRIN

)

) Group Art Unit: 1644

) Examiner: Phillip Gambel, Ph.D.

) Confirmation No.: 9068

RECEIVED

JUL 17 2003

REQUEST FOR CONTINUED EXAMINATION
TRANSMITTAL LETTER TECH CENTER 1600/2900

MAIL STOP RCE

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450



21839

Sir:

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the
[] \$375.00 (2801) [X] \$750.00 (1801) fee due under 37 C.F.R. § 1.17(e).

1. [] A. Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified in item 2 below.

[X] B. Applicant(s) previously submitted the following documents for which continued examination is requested:

[] Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____.

[] Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.

[X] Other: Amendment and Reply dated 10/24/02 _____.

2. The following documents are enclosed with this submission:

[X] Amendment/Reply.

[] Affidavit(s)/Declaration(s).

[X] Information Disclosure Statement (IDS).

[X] Petition for Extension of Time.

[X] Other: PTO 1449 form with 18 references _____.

3. [] Small entity status is hereby claimed.

[X] No additional claim fee is required.

[] The fee is calculated below on the basis of the highest number of claims already paid for in this application prior to this submission:

07/15/2003 HDENESS1 00000103 09155739

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(05-03)

Request for Continued Examination Transmittal Letter
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C L A I M S					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS THUS PAID FOR	EXTRA CLAIMS	RATE	Fee
Basic Fee					\$750.00 (1001)
Total Claims	11	MINUS 26 =	0	× \$18.00 (1202) =	-0-
Independent Claims	2	MINUS 3 =	0	× \$84.00 (1201) =	-0-
If multiple dependent claims are presented, add \$280.00 (1203)					-0-
Total Fee					-0-
If small entity status is claimed, subtract 50% of Total Fee					N/A
TOTAL FEE DUE					\$750.00

4. A check in the amount of \$ 750.00 is enclosed for the fee due.
5. Charge \$ _____ to Deposit Account No. 02-4800 for the fee due.
6. Applicant(s) requests suspension of action by the Office until at least ___, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: July 14, 2003

By: Jay F. Williams
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